Agency Report of: RECEIVED Ceremonial Role Events and Ticket/Pass Distributions Jose City Clerk A Public Document 1. Agency Name California Date Stamp **Form** City of San José 2015 MAR 17 For Official Use Only Division, Department, or Region (If Applicable) Parks. Recreation and Neighborhood Services Designated Agency Contact (Name, Title) Veronica Schulte, Staff Specialist Amendment (Must provide explanation in Part 3.) Area Code/Phone Number Date of Original Filing: . 408-793-5597 veronica.schulte@sanjoseca.gov (Month, Day, Year) 2. Function or Event Information 206 Face Value of Each Ticket/Pass \$ _ Does the agency have a ticket policy? Yes ⊠ No □ Event Description NHL Hockey Game Provide Title/Explanation Ticket(s)/Pass(es) provided by agency? If no: _ Yes⊠ No□ Name of Source Was ticket distribution made at the behest No ⊠ Yes □ If yes: _ Official's Name (Last, First) of agency official? Recipients • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization. Number of Α. Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit Ticket(s)/ Pass(es) Recognition for participating in the Parks, Recreation and Parks, Recreation and Neighborhood 24 Neighborhood Services consumer outreach project. Services Number of Name of Individual B. Ticket(s)/ Identify one of the following: (Last, First) Ceremonial Role Income If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Other \square Income If checking "Ceremonial Role" or "Other" describe below: Number of Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy Ticket(s)/ Pass(es) (include address and description)

Verification I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. | Matrix Coro | Investin Assistant | Director | 3/16/15 | | Signature of Agency Head or Designee | Print Name | Title | (Month, Day, Year) | Comment: | FPPC Form 802 (4/12) | | FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)

TICKET DISTRIBUTION

By checking "Received" below, I understand these tickets cannot be resold or redistributed and are to be used by me and my family member/guest. The total value of each ticket are \$98-\$206.

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11	Jon Moog Maryann Casorla Cassie Hunter	9/		1 (Karyan)
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OR	GANIZATION	TIME	EVENT DATE	LOCATION
PR	RNS – EE Recognition Team	1:00 PM	March 14, 2015	San José Arena, NHL Sharks Game